## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)					_	SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY				
TOTAL CLAIMS		65				Г	RATE	FEE		RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA		Ē	BASIC FEE	355.00	OR	BASIC FEE	· 710.00	
TOTAL CHARGEABLE CLAIMS			ပ် 5 minus 20=		• 45			X\$ 9=	405	OR	X\$18=	
INDEPENDENT CLAIMS			1 2 minus 3 =		• 9			X40=	360	OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT				Ī	+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2					L	TOTAL	1120	OR	TOTAL			
	CLAIMS AS AMENDED - PART II						SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
		(Column 1) CLAIMS		(Colu		(Column 3)	-	SMIALL		ON I I	OMACE !	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 65	Minus	6	14			X\$ 9=		OR	X\$18=	
AME	Independent	* 12 NTATION OF M	Minus	*** /	T CLAIM	= -		X40=		OR	X80=	
	FIRST PRESE	NIATION OF W	JLIIPLE DEF	EINDEIN	CLAIN			+135=		OR	+270=	
							_	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	-37
		(Column 1)		(Colu	mn 2)	(Column 3)	ľ			•	1	-8
		CLAIMS	T-11	HIGH	HEST		l r		ADDI-	8		ADDI-
AMENDMENT B		REMAINING AFTER AMEDICMENT		PREVI	MBER OUSLY FOR	PRESENT		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	. 01	Minus	6	,5	= 4		X\$ 9=	36.00	OR	X\$18=	
	Independent	* // NTATION OF M	Minus	***	T CLAIM	=		X40=		OR	X80=	
<u> </u>	THOTTHESE	NATION OF IN	OLIN EL OLI	LINDLIN	1 00 1111		'	+135=		OR	+270=	
								TOTAL		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)		ADDIT. FEE I		•	AUUII. FEE	
Γ.		CLAIMS	1	HIG	HEST		lг		ADDI-			ADDI-
AMENDMENT C		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	. 70	Minus	** (	29	= /		X\$ 9=	900	OR	X\$18=	
	Independent	• // ENTATION OF M	Minus	*** /	J T CLAIM	=		X40=		OR	X80=	
L	TIHOI PHESE	INTATION OF M	OLITE DE	CINDEN	II CLAIM		1	+135=		OR	+270=	
•	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."							TOTAL		OR	TOTAL ADDIT. FEE	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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A	ution or Docket Number .
09/	883991

CLAIMS A	(Column 1)	SMALL ENTITY TYPE	OR.	OTHER THAN OR: SMALL ENTITY		
TOTAL CLAIMS			RATE FEI	1 1-	RATE	FEE
FOR	NUMBER FILED	NUMBER EXTRA	BASIC FEE 3	00 OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS	minus 20=	*	X\$ 9=	OR	X\$18=	
INDEPENDENT CLAIMS	minus 3 =	*	X42=	OR	X84::	
MULTIPLE DEPENDENT CLAIM F	RESENT		+140=	OR	+280=	
* If the difference in column 1 is	less than zero, ente	er "0" in column 2	TOTAL	OR	TOTAL	
CLAIMS AS	AMENDED - PAF		SMALL ENTI	ry OB	OTHER SMALL E	
(Column 1) CLAIMS REMAINING AFTER	HIG NUI PREV	HEST MBER PRESENT HOUSLY EXTRA	RATE TION	JAL	RATE	ADDI- TIONAL FEE
AFTER AMENDMENT  Total *  Independent *	Minus **	a .	X\$ 9=	OR.	X\$18=	
Independent *	Minus ***	.4	X42=	OR	X84=	
FIRST PRESENTATION OF M	MULTIPLE DEPENDEN	VT CLAIM	+140=	OR	+280≈	
		a)	TOTAL ADDIT FEE	OR	TOTAL. ADDIT. FEE	
(Column 1)	(Col	umn 2) (Column 3)				
m CLAIMS REMAINING	NU PRE\	SHEST MBER PRESENT MOUSLY EXTRA	RATE TION	NAL	RATE	ADDI- TIONAL FEE
Total . *	Minus **	=	X\$ 9=	OR	X\$18=	
Total . *  Independent .*	Minus ***	=	X42=	OR	X84=	
FIRST PRESENTATION OF I	MULTIPLE DEPENDE	NT CLAIM	+140=	OR	+280=	
			TOTAL ADDIT FEE	OR	TOTAL ADDIT. FEE	
(Column 1	(Col	lumn 2) (Column 3)				т
O CLAIMS	HIO NU PRE	GHEST JMBER PRESENT VIOUSLY EXTRA		DI- NAL EE	RATE	ADDI- TIONAL FEE
Total * Independent *	Minus **	. =	X\$ 9=	OR	X\$18=	
	Minus <sup>#</sup>	=:	X42=	OR	X84=	
FIRST PRESENTATION OF	MULTIPLE DEPENDE	ENT CLAIM	+140=	OR	+280=	
* If the entry in column 1 is less tha	n the entry in column 2, w	TOTAL	OR	TOTA	L E	
** 11 the "Highest Number Previousl ***If the "Highest Number Previousl The "Highest Number Previously	∠Paid For" IN THIS SPAC	OE is less than 20, enter 20	er found in the appropri	iate box in c	column 1.	
and the second s	Oran o		Sufficient of Minder Contraction			/